	(PE)	PART B	FEE(S)	TRANSMITTAL			
Complete and send this form, together with applicable			fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450				
. (MAR 0 7 2006 E		OF.		ginia 22313-1450		
INSTRUCTIONS: This appropriate. All further cor indicated unless corrected to maintenance fee notification	should be used for tran	smitting the ISSU Patent, advance or in Block 1, by (a			uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep-	hould be completed where correspondence address as arate "FEE ADDRESS" for	
	E ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate of	of mailing can only be used f	or domestic mailings of the	
75	12/08/2005			papers. Each addition	his certificate cannot be used nal paper, such as an assignmate of mailing or transmission.	for any other accompanying ent or formal drawing, must	
OLIFF & BERRIDGE PLC P.O. BOX 19928 ALEXANDRIA, VA 22320				I hereby certify that	Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
			•			(Depositor's name)	
						(Signature)	
				<u> </u>	• • • • • • • • • • • • • • • • • • • •	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/447,554	11/23/1999		ZHIGA	NG FAN	104184	3958	
TITLE OF INVENTION: M	AXIMUM LIKELIHOOD I	ESTIMATION OF	JPEG QUAN	ITIZATION VALUES			
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 🚬 🕻	
nonprovisional	NO	\$1400		\$0	\$1400	03/08/2006	
EXAMINER		ART UNIT C		CLASS-SUBCLASS	j '		
WU, JINGGE		2623		382-251000	. .∞.		
1. Change of correspondence	address or indication of "Fe	ce Address" (37	2. For prin	nting on the patent front page,	list	C DEPOSIT OF DE	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATEN	Γ (print or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on the patent. If an assignment 3/08	mee is identified below the c 72006 MBEYENE2 000001	locument has been filed for 22 240037 09447554	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 1400.00 DA							
Xerôx Corpo	oration		Stamfo	ord, Connecticut			
Please check the appropriate	assignce category or catego	ries (will not be pr	inted on the p	atent): 🗖 Individual 🖫 (Corporation or other private gr	oup entity Government	
			b. Payment of Fee(s):				
☑ Issue Fee ☑ Publication Fee (No small entity discount permitted)			☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 24-0037 (enclose an extra copy of this form).				
5. Change in Entity Status a. Applicant claims St	(from status indicated above MALL ENTITY status. See	•		-	ALL ENTITY status. See 37 C		
The Director of the USPTO in NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issublication Fee (if required) verds of the United States Pate	e Fee and Publicate vill not be accepted and Trademark	tion Fee (if ar I from anyone Office.	ny) or to re-apply any previous other than the applicant; a re	sly paid issue fee to the applications gistered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	Ulto	2/-/	rme	•	arch 7, 2006		

Typed or printed name __Klifton L. Kime Registration No. 42,733 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.